



MISSISSIPPI
Board of Nursing
www.MSBN.ms.gov

Advisory Board Nominee Application for the Office of Nursing Workforce.
Deadline for Receipt of Submission: April 26, 2017 at 5:00 p.m.

RETURN THIS APPLICATION TO THE BOARD

Fax –(601) 957-6301 or email to dthompson@msbn.ms.gov

Include "ONW Application for Advisory Board" in the subject line

We recommend that you include a resume or curriculum vitae

NOMINEE INFORMATION

Last Name		First		M.I.	Date	
Street Address				Apartment/Unit #		
City		State		ZIP		
Cell Phone			E-mail Address			
Nurse License # if applicable						

CURRENT EMPLOYMENT

Position Title :		
Employer Name:		
City/State/Zip:		
Employer Phone : ()		
Employer Email:		

NOMINATOR:

Name :	
Email:	
Phone Number :	